

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 14, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Foxy Lady Lounge, 1823 'O' Street requesting an addition to their current liquor license.

The area request is an expansion of the current outdoor beer garden measuring approximately 22 x 17 foot on the south side of the business. The requested new area requested is 32 x 22 foot.

The Lincoln Police Department recommends denial of this expansion to the beer garden as it is still unknown if exotic dancing will be occurring in this outdoor area, and if not have concerns that other possible illegal activity may occur.

For Council's information, the owners of the business remain the same, and background information on the owners is on file.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency

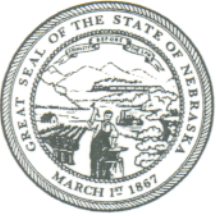


STATE OF NEBRASKA

Run

Set date: 1-10-05

Pit: 1-24-05



Mike Johanns
Governor

NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe

Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

December 7, 2004

A4-137141

72

City Clerk
555 South 10th Street
Lincoln NE 68508-3993

RE: Jerry & Sandy Irwin
dba Foxy Lady
1823 "O" Street
Lincoln, Lancaster Co., NE, 68508

Dear Clerk:

The above referenced licensee has requested permission for an addition of a beer garden approx 15' x 15' on the south side of the licensed premise. Making the license description to read: Entire first floor of bldg approx 24' x 92' plus beer garden to the south approx 32' x 22'.

Please present this request for addition to premise to your Council and send us the results of that action.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Michelle Porter

Michelle Porter
Licensing Division

Enclosure

cc: file

NEBRASKA
CITY OF LINCOLN

2004 DEC -9 P 1:09

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

FILED
CITY CLERKS OFFICE

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

RECEIVED

NEBRASKA LIQUOR
CONTROL COMMISSION

LICENSE NUMBER: 66382 TELEPHONE: 402-435-0890

☒ ADDITION/ RECONSTRUCTION ☐ CHANGE OF LOCATION ☐ DELETION

Address From: _____
 Indicate local governing body jurisdiction; city or county _____

Address To : _____
Indicate local governing body jurisdiction; city or county


- 1) INCLUDE A SKETCH OF THE PROPOSED AREA TO BE LICENSED (8½ x 11 PAPER - BLUEPRINTS NOT ACCEPTED) INDICATE THE DIMENSIONS OF THE AREA TO BE LICENSED AND THE DIRECTION 'NORTH' ON THE SKETCH
- 2) SUBMIT A COPY OF YOUR LEASE OR DEED DEMONSTRATING OWNERSHIP
- 3) IF YOU DO NOT KNOW WHAT JURISDICTION YOU ARE LOCATED IN, CALL THE CITY OF COUNTY CLERK
- 4) IN ORDER TO CLARIFY YOUR CHANGES, AN ATTACHED EXPLANATION IS ALWAYS WELCOME

88-39352

THE ABOVE REFERENCE REQUEST, AS FILED, WILL COMPLY WITH THE RULES AND REGULATIONS OF THE NEBRASKA LIQUOR CONTROL ACT.


SIGNATURE OF LICENSEE

SUBSCRIBED IN MY PRESENCE AND FIRST DULY SWORN TO BEFORE ME ON THIS 30 DAY OF NOV, 2004.

 **GENERAL NOTARY-State of Nebraska**
DAVID POOL
My Comm. Exp. April 14, 2008

NOTARY PUBLIC'S SIGNATURE & SEAL

Bus Ct # 42162
\$415 - mm

FOXY LADY

RECEIVED

DEC - 7 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

per phone Jerry 12/7



I want to expand the new beer garden



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 22, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Hy-Vee, 7151 Stacy Lane requesting a class C liquor license.

This location currently holds a class D/K liquor license.

For Councils information if issued the class C liquor licenses allow for on premise consumption. It has been stated that the request for the class C liquor license is to be used for sampling purposes only.

If this application is approved the Lincoln Police Department requests the following conditions be added to the liquor license:

The on premise consumption of alcohol shall be limited to samplings of 2 ounces or less of any alcoholic beverage.

Background information on the manager and stockholders is on file an available for review on your request.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



STATE OF NEBRASKA

1/24/05



Mike Johanns
Governor

NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe
Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

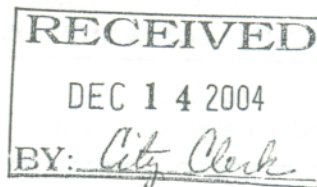
December 13, 2004

Lincoln City Clerk
555 S. 10th Street
Lincoln, NE 68508

Hy Vee #5
7151 Stacy Lane
Class C

A4-140391
183

Re: Liquor application for HyVee #5



Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Tami Freeman
Licensing Division

Rhonda R. Flower
Enclosures Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

21

C - 66563

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission
PO Box 95046,
301 Centennial Mall South
Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>
Phone: (402) 471-2571
Fax: (402) 471-2814

RECEIVED

DEC - 9 2004

Upgrade from DL-41697

NEBRASKA LIQUOR CONTROL COMMISSION

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in **Triplicate** 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input checked="" type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.

TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WITH APPLICATION	
Type of application being applied for (check appropriate box)		
1. <input type="radio"/> Individual License requires Form 1 to be attached.	Name Jill Lalone	
2. <input type="radio"/> Partnership License requires Form 2 to be attached.	Firm Name Hy-Vee, Inc.	Address 5820 Westown Parkway
3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached		

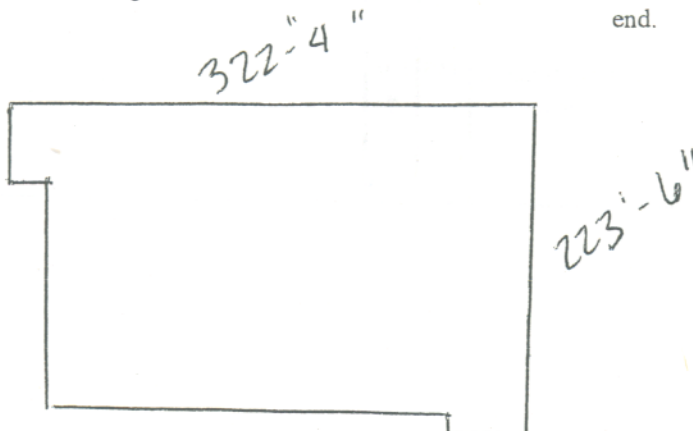
SECTION A – LOCATION INFORMATION – Must be completed by all applicants			
Trade Name (name of business) Hy-Vee (#5)		Telephone Number at premise to be licensed 402-489-4244	
1) Street Address of Proposed licensed premise 7151 Stacy Lane		2) Mailing Address for receipt of Liquor Control Commission mailings 5820 Westown Parkway	
City Lincoln	County Lancaster	City 5820 Westown Pa	County Polk
Zip Code 68516	Is this located inside the city limits? <input checked="" type="radio"/> Yes <input type="radio"/> No	Zip Code 50266	

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.



No basement

SECTION B OTHER INFORMATION REQUIRED *			
	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed
<p>* 1. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>	

<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Midwest Heritage Bank 1025 Braden Chariton, IA 50049 Richard Jurgens - President John Briggs - Treasurer</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>Please see attached</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Scott Schlatter</p>		

13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	Store Director for almost 5 years		
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)	Please see attached		
15. When do you intend to open for business?	This location is already open, it is currently run under license DK41697.		
16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.			
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
See attached			

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.


NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Richard N. Jurgens	1992	Present	West Des Moines, IA
Carol Jurgens	Same	-	-

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

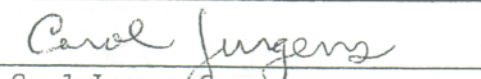
Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign
here
sign
here
sign
here
sign
here


Richard N. Jurgens, President

sign
here
sign
here
sign
here
sign
here


Carol Jurgens, Spouse

Subscribed in my presence and sworn to before me this

22nd

day of

November

2004

RECEIVED

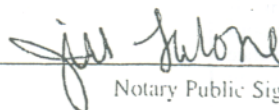
(SEAL)

DEC - 9 2004



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

NEBRASKA LIQUOR CONTROL COMMISSION


Notary Public Signature

FORM LS-200
1
Rev. '00

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Charles M. Bell	1985	1994	Chariton, IA
"	1994	Present	Des Moines, IA

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign
here
sign
here
sign
here
sign
here

Charles M. Bell
Charles M. Bell, Exec. V.P.

sign
here
sign
here
sign
here
sign
here

RECEIVED

DEC - 9 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

Subscribed in my presence and sworn to before me this

22nd

day of

November

2004

(SEAL)



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

sign
here

Jill Lalone

Notary Public Signature

FORM 35-20-0

Rev. '90

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Stephen P. Meyer	1992	Present	Des Moines, IA

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign here Stephen P Meyer
 sign here Stephen P. Meyer, Secretary
 sign here _____
 sign here _____
 sign here _____

sign here
 sign here
 sign here
 sign here
 sign here

SINGLE

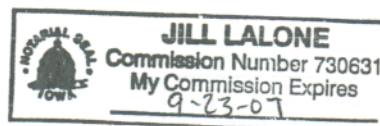
RECEIVED

DEC - 9 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Subscribed in my presence and sworn to before me this 22nd day of November, 2004.

(SEAL)



sign here

Jill Lalone
 Notary Public Signature

Notary Public Signature

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
John C. Briggs	1985	1994	Chariton, IA
"	1994	Present	Waukee, IA
Dianne Briggs	same	-	-

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign
here

John C. Briggs, Treasurer

sign
here

sign
here

sign
here

sign
here

Dianne Briggs, Spouse

sign
here

sign
here

sign
here

RECEIVED

DEC - 9 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Subscribed in my presence and sworn to before me this

22nd

day of

November

2004

(SEAL)



sign
here

Jill Lalone

Notary Public Signature

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM LS-400
1
Rev. 5/01

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Stephen P. Meyer	1992	Present	Des Moines, IA

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25 % of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

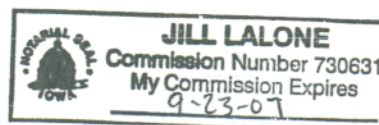
sign here Stephen P Meyer
 sign here Stephen P. Meyer, Secretary
 sign here _____
 sign here _____
 sign here _____

sign here SINGLE
 sign here DEC - 9 2004
 sign here NEBRASKA LIQUOR
 sign here CONTROL COMMISSION

Subscribed in my presence and sworn to before me this 22nd day of November, 2004.

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

(SEAL)



sign here Jill Lalone
 Notary Public Signature

Corporation/LLC Application for License - Form 3
Nebraska Liquor Control Commission

RECEIVED

DEC - 9 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: **a)** each stockholder owning over 25% of the stock, **b)** chief executive officer, **c)** proposed manager and **d)** all spouses
- 3) Information regarding spouses must be completed

Required areas marked by a red asterisk (*)

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

Hy-Vee, Inc. *

Total Number of Shares (if corporation)

16,666,200 *

Corporate Street Address

5820 Westown Parkway *

Mailing address for receipt of Liquor Control Commission Mailings

5820 Westown Parkway *

Corporate Telephone Number

515-267-2800 *

City

West Des Moines *

County

Poilk *

State

Iowa *

Zip Code

50266 * -

Name of Registered Agent

x *

Name of Proposed Manager

Scott Schlatter *

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name

Richard N. Jurgens *

Title

President, CEO *

Date of Birth

Social Security Number

* -

Home Address (1)

3008 Jordan Grove *

City

West Des Moines *

State

Iowa *

Zip Code

50265 * -

Home Telephone Number

515-267-2800 *

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

Name of Officers, Directors, Members and Spouses.
Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Jurgens, Richard N.

President, CEO

Spouse Name

Jurgens, Carol Jean, Gaffney

Partner Number of Shares / % 250,117

Spouse Number of Shares / %

Name of Officers, Directors, Members and Spouses.

Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Bell, Charles			Executive VP
Spouse Name			
Partner Number of Shares / % 347,002	Spouse Number of Shares / %		
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases			
Name Meyer, Stephen P.			Secretary
Spouse Name			
Partner Number of Shares / % 153,692	Spouse Number of Shares / %		
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases			
Name Briggs, John C.			Treasurer
Spouse Name Briggs, Diane L. Herrin			
Partner Number of Shares / % 59,048	Spouse Number of Shares / %		
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases			
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

(If Necessary, Continue on Separate Sheet)

Is this Corporation/LLC controlled by another Corporation?

Yes ☐ No ☒

Name of control Corporation

If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: October 01 Ending date: September 30

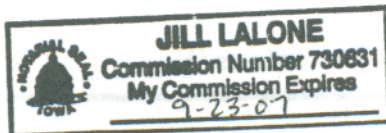
State of Iowa

)

) ss.

Polk County

)



Jill Lalone

Notary Public Signature & Seal

By *[Signature]*
President/Member Richard W. Jurgens

Stephen P. Meyer
Secretary/Member Stephen P. Meyer

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Verify Form and Print

FORM 35-4183
REV. 02/01

RECEIVED

DEC - 9 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

Application for Corporate Manager

Must Be A Nebraska Resident

Please submit in Triplicate

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Hy-Vee, Inc.

Class & License number

C

Trade Name of Licensed Premise

Hy-Vee #5

Street Address of Licensed Premise

7151 Stacy Lane

City

Lincoln

County

Lancaster

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO

APPLICANT INFORMATION (MUST BE 21 OR OVER)

Full Name (Last, First, Middle, Maiden)

Schlatter, Scott, A.

Sex *

F

M

Social Security Number

Date of Birth

Place of Birth

Sumner, Iowa

Home Street Address

5932 South 81st Street

City

Lincoln

State

NE

Zip Code

68516

Home Telephone Number

402-483-2137

Business Telephone Number

402-489-4244

Drivers License Number

H13058675

State

NE

RECEIVED

County

Lancaster DEC - 9 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Are You Married? * Yes ☒ No ☐ If Yes, You must complete the following:

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Schlatter, Deb

Social Security Number

Drivers License Number

State

NE

Date of Birth

Place of Birth

West Union, Iowa

* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No

☐

☒

* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No

☒

☐

Hy-vee Food & Drugstore 5
7151 Stacy Lane

41697

5/1/04 - 4/30/05

* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No

☐

☒

* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?

Nebraska Liquor Control Act (§53-131.01)

Yes No

☒

☐

* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No

☐

☒

CARDS ON FILE

RESIDENCES FOR PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

Year
From To

Applicant: City & State

5932 So 81st Lincoln NE 2003 Present

Spouse: City & State

5932 So 81st Lincoln NE 2003 Present

Year
From To

Applicant: City & State

1109 NE Depot Drive Lees Summit MO 2000 2003

Spouse: City & State

1109 NE Depot Drive Lees Summit MO 2000 2003

Year
From To

Applicant: City & State

7549 Hayes Circle Kalston NE 1995 2000

Spouse: City & State

7549 Hayes Circle Kalston NE 1995 2000

Year
From To

Applicant: City & State

Spouse: City & State

EMPLOYERS - LIST LAST TWO EMPLOYERS

Year

From To

Name of Employer

Hy-Vee Inc 1990 Present

Name of Supervisor

Pat Hensley 402-578-7865

Year

From To

Name of Employer

MBC Foods 1989 1990

Name of Supervisor

Telephone Number

Rich BakerNA

**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY
APPLICANT & SPOUSE**

STATE OF NEBRASKA)

) SS

COUNTY OF)

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

Rich Baker
Signature of Applicant

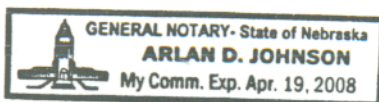
Deborah Baker
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this
9 day of December 2004.

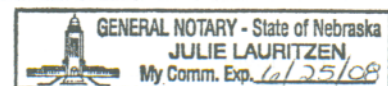
Subscribed in my presence and sworn to before me this
7th day of December 2004.

Arland D. Johnson
Notary Signature & Seal

Julie Lauritzen
Notary Signature & Seal



Verify and Print

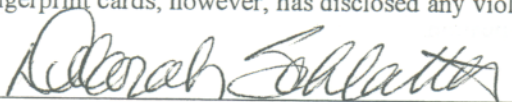
**RECEIVED**FORM 35-4013
REV. 2/01

DEC - 9 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

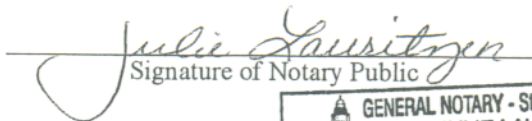
**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

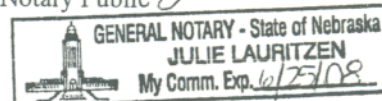
The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.



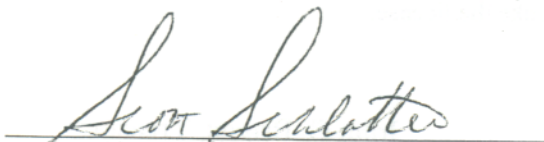
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 7th day of December, A.D., 2004.


Signature of Notary Public

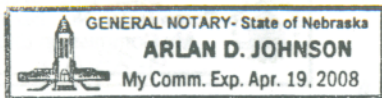


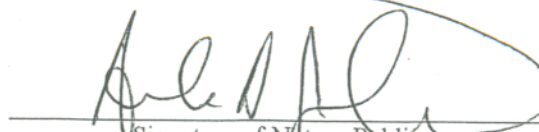
The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.


Signature of Licensee/Applicant

Scott Schlatte
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 9th day of December, A.D., 2004.




Signature of Notary Public

RECEIVED

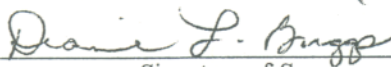
DEC - 9 2004

FORM 35-4178
REV 2/01

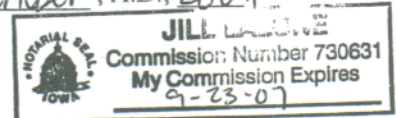
**NEBRASKA LIQUOR
CONTROL COMMISSION**

**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

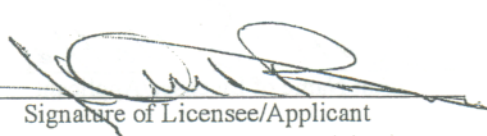

Signature of Spouse **Dianne L. Briggs**

SUBSCRIBED in my presence and sworn to before me this 22nd day of November, A.D., 2004




Signature of Notary Public

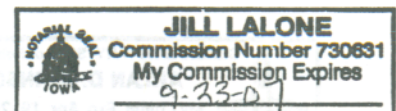
The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.


Signature of Licensee/Applicant

John C. Briggs, Treasurer

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 22nd day of November, A.D., 2004




Signature of Notary Public

RECEIVED

DEC - 9 2004

FORM 35-4178
REV 2/01

**NEBRASKA LIQUOR
CONTROL COMMISSION**

**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

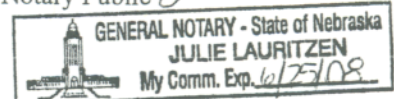
The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Deborah Schlatte

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 7th day of December, A.D., 2004.

Julie Lauritzen
Signature of Notary Public

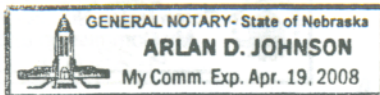


The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Scott Schlatte
Signature of Licensee/Applicant

Scott Schlatte
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 9th day of December, A.D., 2004.



Arlan D. Johnson
Signature of Notary Public

RECEIVED

DEC - 9 2004

FORM 35-4178
REV 2/01

**NEBRASKA LIQUOR
CONTROL COMMISSION**

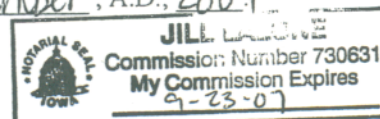
**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Dianne L. Briggs

Signature of Spouse Dianne L. Briggs

SUBSCRIBED in my presence and sworn to before me this 22nd day of November, A.D., 2004



Jill Lalone

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]
Signature of Licensee/Applicant

John C. Briggs, Treasurer

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 22nd day of November, A.D., 2004



Jill Lalone

Signature of Notary Public

RECEIVED

DEC - 9 2004

FORM 35-4178
REV 2/01

**NEBRASKA LIQUOR
CONTROL COMMISSION**

**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived-of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Carol J. Jurgens

Signature of Spouse Carol J. Jurgens

SUBSCRIBED in my presence and sworn to before me this 22nd day of November, A.D., 2004



Jill Lalone

Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Richard N. Jurgens

Signature of Licensee/Applicant

Richard N. Jurgens, President

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 22nd day of November, A.D., 2004



Jill Lalone

Signature of Notary Public

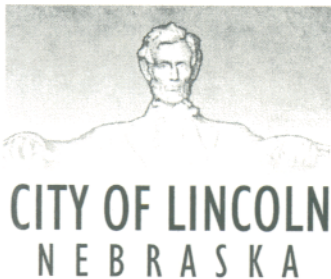
RECEIVED

FORM 35-4178

DEC - 9 2004

REV 2/01

**NEBRASKA LIQUOR
CONTROL COMMISSION**



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 22, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of N-Zone Bar, 728 'Q' Street requesting an addition to their current liquor license CK-43717.

The area request is an outdoor beer garden measuring approximately 11 x 9 foot on the north side of the business.

For Council's information, the owners of the business remain the same, and background information on the owners is on file.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency

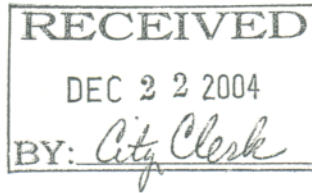


STATE OF NEBRASKA

1-24-04



Mike Johanns
Governor



NEBRASKA LIQUOR CONTROL COMMISSION
Robert B. Rupe
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)
web address: <http://www.nol.org/home/NLCC/>

December 21, 2004

Lincoln City Clerk
555 South 10th Street
Lincoln, NE 68508

A4-140392
210

RE: Geemax, Inc dba The N-Zone
Lincoln CK-43717

The above referenced licensee has submitted a request for **Addition**. See attached request & map.

**Addition request is to add a Beer Garden to the North side
of Premise. Addition is approx 11' x 9'.**

Please present this request for **Addition** to your board and send us the results of that action.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION



Tami Freeman
Licensing Division

tf

cc: file

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

PLEASE COMPLETE AND RETURN TO:

NE LIQUOR CONTROL COMMISSION
PO BOX 95046
LINCOLN, NE 68509-5046

REQUEST FOR ADDITION, DELETION, RECONSTRUCTION
& CHANGE OF LOCATION

FEE OF \$45 REQUIRED

LICENSEE'S NAME: Geemax Inc.
TRADE NAME: The N-Zone
PREMISE ADDRESS: 728 Q St
CITY/COUNTY: Lincoln - Lancaster
TELEPHONE: 402-475-8683
LICENSE NUMBER: ~~HK 33617~~ CK 43717

RECEIVED

DEC 20 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

PLEASE CHOOSE ONE OF THE FOLLOWING

- ☒ ADDITION TO LICENSED PREMISE OR
RECONSTRUCTION
☐ DELETION TO LICENSED PREMISE
☐ RECONSTRUCTION

- ☐ CHANGE OF LOCATION (this application will not
be accepted if the license is moving into another
jurisdiction)

ADDRESS
FROM:

local
governing
body
jurisdiction:
city
or
county

ADDRESS
TO:

local
governing
body
jurisdiction:
city
or
county

- INCLUDE A SKETCH OF THE PROPOSED AREA TO BE LICENSED (8 1/2 x 11 PAPER-BLUEPRINTS NOT ACCEPTED) INDICATE THE DIMENSIONS OF THE AREA TO BE LICENSED AND THE DIRECTION "NORTH" ON THE SKETCH
- SUBMIT A COPY OF YOUR LEASE OR DEED DEMONSTRATING OWNERSHIP
- IF YOU DO NOT KNOW WHAT JURISDICTION YOU ARE LOCATED IN, CALL THE CITY OR COUNTY CLERK
- IN ORDER TO CLARIFY YOUR CHANGES, AN ATTACHED EXPLANATION IS ALWAYS WELCOME

RECEIVED

DEC 20 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION****AFFIDAVIT**

THE ABOVE REFERENCE REQUEST, AS FILED, WILL COMPLY
WITH THE RULES AND REGULATIONS OF THE NEBRASKA
LIQUOR CONTROL ACT.

Mike McCarty - owner
SIGNATURE OF LICENSEE

Patricia A. McCarty - president

SUBSCRIBED IN MY PRESENCE AND FIRST DULY SWORN TO
BEFORE ME ON THIS

20th DAY OF December, 2004.

Stacy M Durr



12/17/04

The proposed addition to our existing liquor license would allow our patrons to step outside and smoke while retaining their drink. The addition is located at the rear of The N-Zone, below ground, at the bottom of the existing steps. There would be a gate installed that says NO DRINKS BEYOND THIS POINT. The addition is not visible to anyone in the area. It is below ground, surrounded in concrete walls. It would have benches along the walls, large ashtrays and space heaters. There would be no sound issues to anyone in the immediate area.

The dimensions are drawn on the attached sheets.

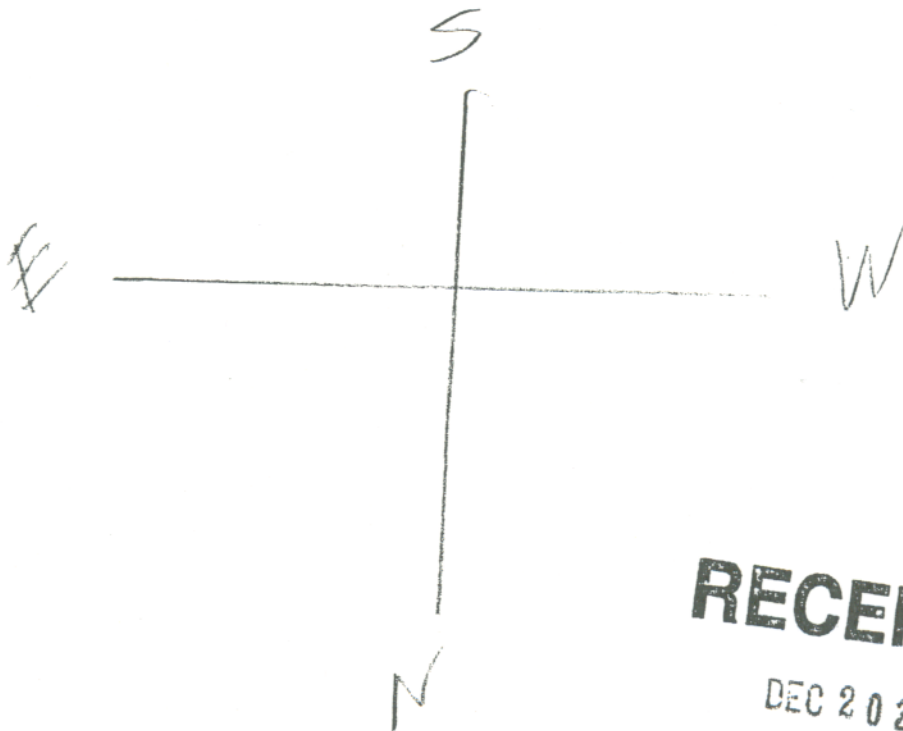
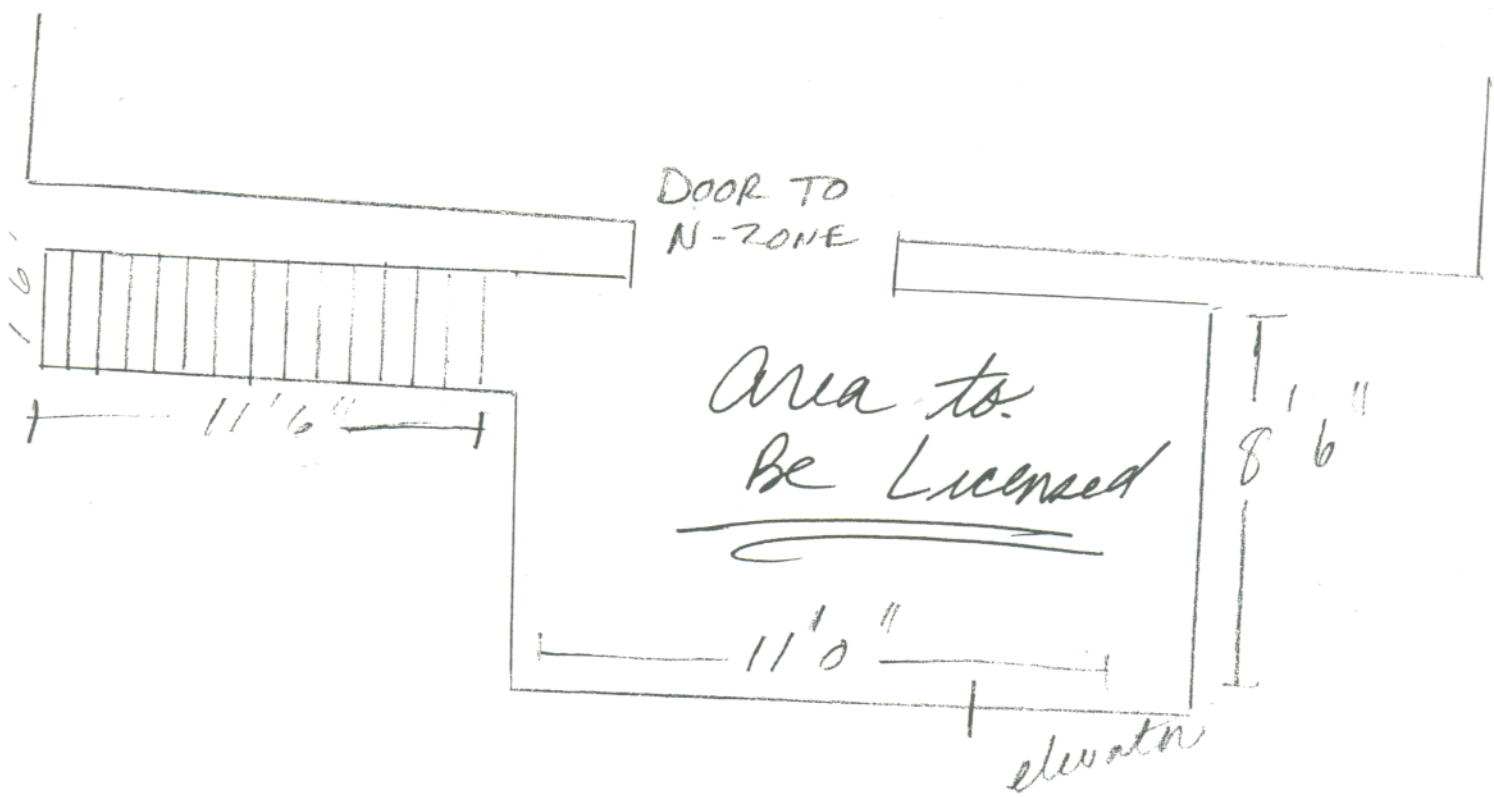
Sincerely
Mike McCarty

Owner

RECEIVED

DEC 20 2004

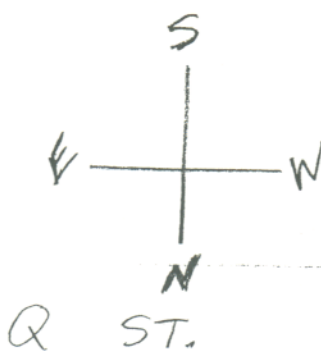
**NEBRASKA LIQUOR
CONTROL COMMISSION**



RECEIVED

DEC 20 2004

NEBRASKA LIQUOR
CONTROL COMMISSION



RECEIVED

DEC 20 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

BACIANI
RESTAURANT

THE N-ZONE

728 Q ST.

SINCLAIR
HILL
ASSOC.

8'11"
11'11"
8'11"

AREA TO
BE ADDED



11'0" x 8'6"

ST.
7'11"

PARKING
LOT

PARKING
LOT

PARKING
LOT

ALLEY - - - ALLEY - - - ALLEY - - -

HARDY
BUILDING

LARSON
FURN
BUILDING

PARKING



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 27, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Libations Too, 5310 South 56th Suite 1 requesting an addition to their current liquor license C-45337.

The area request is an outdoor beer garden measuring approximately 10 x 27 foot on the west side of the business.

For Council's information, the owners of the business remain the same, and background information on the owners is on file.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



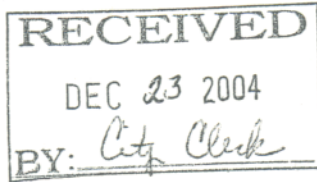
Does NOT Need SF

STATE OF NEBRASKA

PH: 1-24-05



Mike Johanns
Governor



NEBRASKA LIQUOR CONTROL COMMISSION

Robert B. Rupe

Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

A4-141653
180

December 23, 2004

Office of the City Clerk
555 So 10th St, Suite 103
Lincoln, NE 68508

RE: Carpcorp dba Libations, Too...
License #C-45337

Dear Clerk:

The above referenced licensee has submitted a request for addition of a beer garden "Outdoor Lounge" approx 10' x 27' to the west, see enclosed sketch.

Advise if the council has any objections to addition of this "Beer Garden".

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

A handwritten signature in cursive script that reads "Mary Messman".

Mary Messman
Licensing Division

mm

cc: file

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

PLEASE COMPLETE AND RETURN TO:

NE LIQUOR CONTROL COMMISSION
PO BOX 95046
LINCOLN, NE 68509-5046

REQUEST FOR ADDITION, DELETION, RECONSTRUCTION
CHANGE OF LOCATION

FEE OF \$45 REQUIRED

LICENSEE'S NAME: Carp Corp
TRADE NAME: Libations, Too...
PREMISE ADDRESS: 5310 S. 56th Street Suite 1
CITY/COUNTY: Lincoln Lancaster County
TELEPHONE: 402-420-6494
LICENSE NUMBER: 45337 C

mm

PLEASE CHOOSE ONE OF THE FOLLOWING

- ☒ ADDITION TO LICENSED PREMISE OR RECONSTRUCTION
☐ DELETION TO LICENSED PREMISE
☐ RECONSTRUCTION
☐ CHANGE OF LOCATION (this application will not be accepted if the license is moving into another jurisdiction)

Beer Garden
"Outdoor Lounge"

WITH BUILDING PERMIT
FOR ADDITION IS B0404107
DATED 12.14.04

ADDRESS
FROM:

local
governing
body
jurisdiction:
city or
county

Ind

ADDRESS
TO:

local
governing
body
jurisdiction:
city or

Ind

CK # 6483

\$45.00

(mp) Rec # 135056

city or
county

- INCLUDE A SKETCH OF THE PROPOSED AREA TO BE LICENSED (8 1/2 x 11 PAPER-BLUEPRINTS NOT ACCEPTED) INDICATE THE DIMENSIONS OF THE AREA TO BE LICENSED AND THE DIRECTION "NORTH" ON THE SKETCH
- SUBMIT A COPY OF YOUR LEASE OR DEED DEMONSTRATING OWNERSHIP
- IF YOU DO NOT KNOW WHAT JURISDICTION YOU ARE LOCATED IN, CALL THE CITY OR COUNTY CLERK
- IN ORDER TO CLARIFY YOUR CHANGES, AN ATTACHED EXPLANATION IS ALWAYS WELCOME

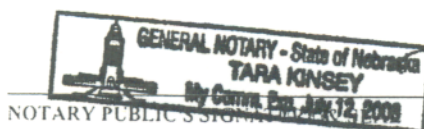
AFFIDAVIT

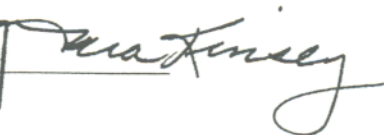
THE ABOVE REFERENCE REQUEST, AS FILED, WILL COMPLY WITH THE RULES AND REGULATIONS OF THE NEBRASKA LIQUOR CONTROL ACT.


SIGNATURE OF LICENSEE

SUBSCRIBED IN MY PRESENCE AND FIRST DULY SWORN TO BEFORE ME ON THIS

16 DAY OF NOVEMBER 2004.





Print Form

EXPLANATION FOR REQUEST FOR ADDITION TO LICENSED PREMISE

Following is an explanation for my request for an addition to our licensed premise:

Carpcorp
DBA Libations, Too
5310 S. 56th Street, Suite 1
Lincoln, NE 68516
(402) 420-6494
Liquor License #45337 C

I am adding an outdoor open-air lounge to Libations, Too due to recent action from the Lincoln-Lancaster County Health Department, Lincoln City Council and recent public city-wide vote regarding approval of a total smoking ban. Libations, Too is a cigar and martini bar and our understanding is the Health Department and City Council will be enforcing a total smoking ban effective January 1, 2005. I have attached a copy of the blueprint for this addition/outdoor lounge. The outdoor lounge will accommodate approximately four tables and I would like my customers to be able to enjoy their alcoholic beverages while smoking outdoors.

Your prompt consideration of this request is appreciated.

A handwritten signature in cursive script that reads "Michael D. Carpenter".

Michael D. Carpenter
President
Carpcorp/Libations, Too

OCT-28-2004 06:06 PM LIBATIONS, TOO

4024201576

P. 02

October 27, 2004

Mr. Ray Hill
City Planning Department
555 South 10th Street
Lincoln, NE 68508

Dear Ray:

As property owner of 5310 S 56th, currently leased to Libations Too, I authorize Scott D. Sullivan, AIA, to sign on behalf of the Owner for this application to construct a 218 s.f. outdoor lounge to the west side of said property. I understand this will be a fenced area which requires the elimination of two (2) parking stalls.

Thank you,

Jeri L Watts

P.O. Box 128

Panama, NE 68419

Owner

(SIGNATURE + ADDRESS)

NEW PARTITION (5/8" TYPE "X" GMB BOTH SIDES
OF 2" X 4" WOOD STUDS AT 16" O.C.) W/ 3'-0" X
1'-0" X 1 3/4" (60-MIN) WOOD DOOR WITH CLOSER
AND LEVER LOCKSET (1-HR WALL) AT BASEMENT

EXIST. WALLS TO REMAIN

EXIST. STAIRS DOWN

EXIST. CONDENSERS TO REMAIN
EXIST. CONVEYOR TO REMAIN

Addition

EXIST. CONC.
SLABS TO REMAIN

NEW 4" CONC. WALK, ON 2" SAND, ON
COMPACTED FILL

1/2" EXP. JOINT

NEW 6" H CURBING

4" EQ VINYL FENCE POSTS (TYP)
SPACED TO ALIGN W/ EXIST. PAVING
JOINTS UNLESS SHOWN OTHERWISE

1'-0" H VINYL FENCING TYP.
BOTTOM OF FENCING RAISED
2" MIN. TO ALLOW DRAINAGE

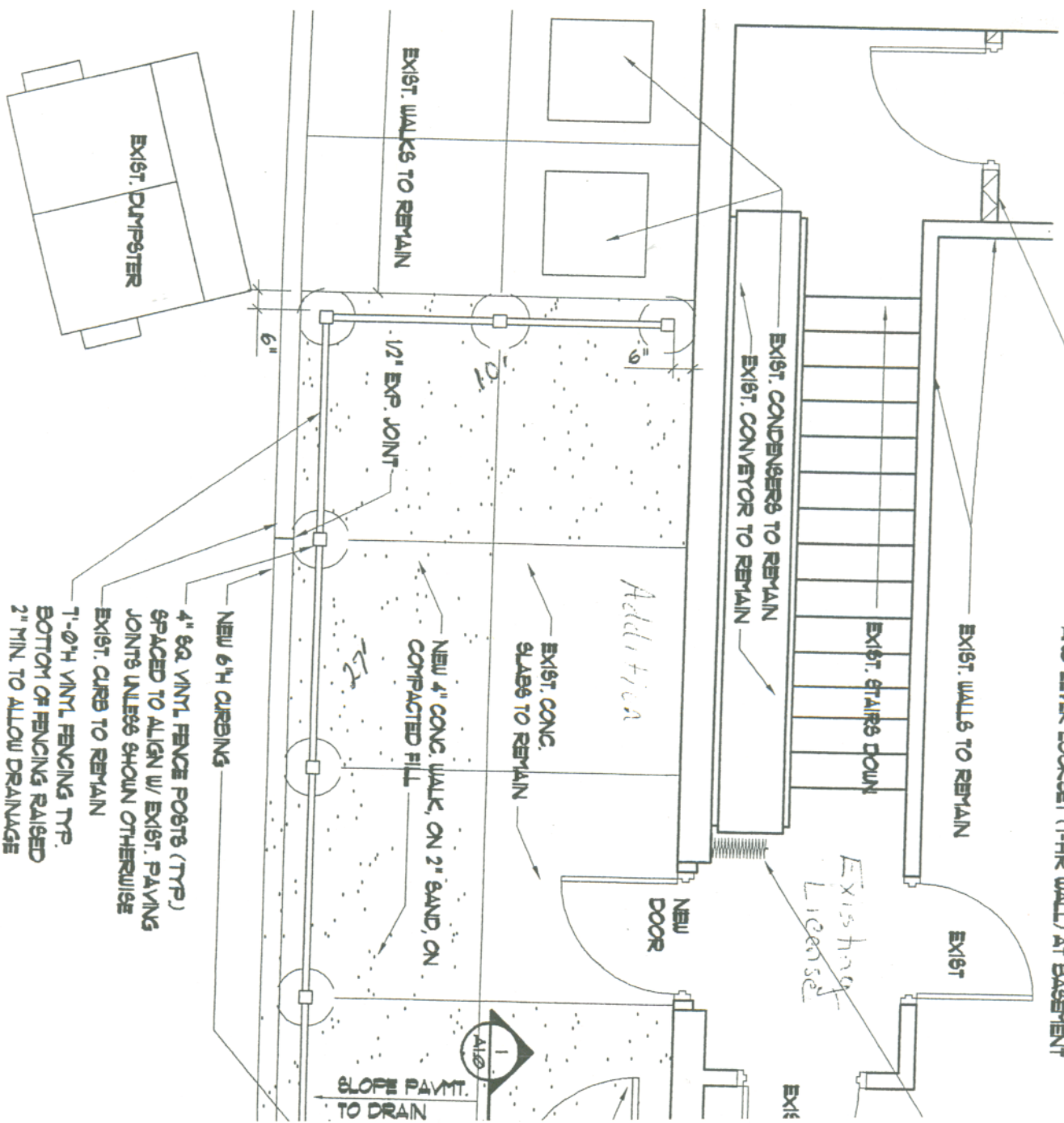
SLOPE PAVMT.
TO DRAIN



NEW
DOOR

EXIT

*Existing
License*





Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

December 28, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Lincoln NE Lodging LLC requesting a class I liquor license.

Lincoln NE Lodging LLC has purchased the business Beacon Hills. Beacon Hills currently has a class I liquor license.

Carole Regan will remain as the manager of this liquor license. Background information on Carole Regan will be omitted as she has been approved by the Council as the current manager.

Stockholder information on Lincoln NE Lodging LLC has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency

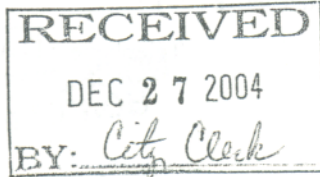


STATE OF NEBRASKA

1-24-05



Mike Johanns
Governor



NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe
Executive Director

301 Centennial Mall South, 5th Floor
P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

December 23, 2004

AY-141959

131

Lincoln City Clerk
555 So 10th St
Suite 103
Lincoln NE 68508

Lincoln NE Lodging, LLC
5353 No. 27th Street
Class I

RE: "Beacon Hills"

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission ('53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER '53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE APROPERLY@ LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Mary Messman
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

LICENSE APPLICATION CHECKLIST

Required areas marked by a red asterisk (*)

Applicants Lincoln NE Lodging, LLC *

Telephone # 320-202-3100 *

Trade Name Beacon Hills *

Previous Trade Name N/A *

NEBRASKA LIQUOR
CONTROL COMMISSION
DEC 22 2004

PROVIDE ALL THE ITEMS REQUESTED. FAILURE TO PROVIDE ANY ITEM WILL CAUSE THIS APPLICATION TO BE RETURNED OR PLACED ON HOLD. ALL DOCUMENTS MUST BE LEGIBLE. ANY FALSE STATEMENT OR OMISSION MAY RESULT IN THE DENIAL, SUSPENSION, CANCELLATION OR REVOCATION OF YOUR LICENSE. IF YOUR OPERATION DEPENDS ON RECEIVING A LIQUOR LICENSE THE NEBRASKA LIQUOR COMMISSION CAUTIONS YOU THAT IF YOU PURCHASE, REMODEL, START CONSTRUCTION, SPEND OR COMMIT MONEY THAT YOU DO SO AT YOUR OWN RISK. THIS APPLICATION DOES NOT GUARANTEE YOU A LIQUOR LICENSE.

Prior to submitting your application review the application carefully to ensure that all sections are completed, and that any omissions or errors have not been made. **All applications & attachments must be submitted in triplicate.**

REQUIRED ATTACHMENTS

EACH ITEM MUST BE CHECKED OFF AND INCLUDED OR CHECKED N/A FOR NOT APPLICABLE

- 1* ☒ Included ☐ N/A Fingerprint cards for each person (two cards per person) must be enclosed with a separate check payable to the Nebraska State Patrol for processing in the amount of \$33.00 for each person.
- 2* ☒ Included ☐ N/A Enclose registration and license fees for the appropriate class of license.
- 3* ☒ Included ☐ N/A Enclose the appropriate additional application forms; Individual License - Form 1; Partnership License - Form 2; Corporate License - Form 3 and Manager application (with corporate application only).
- 4* ☒ Included ☐ N/A Enclose a copy of the lease that extends through the license year or real estate deed or sales contract/agreement demonstrating ownership or control of the premises. Include a specific listing of any equipment or fixtures that are part of any agreements to purchase, rent or lease from current license holder.
- 5* ☒ Included ☐ N/A Enclose a copy of the Temporary Agency Agreement if applicable - only Nebraska Liquor Control Commission approved agreement forms will be accepted.
- 6* ☒ Included ☐ N/A Enclose a copy of the inventory of alcoholic stock that are being purchased from the existing license by you. The inventory shall include the brand names and container sizes.
- 7* ☐ Included ☒ N/A Enclose a list of any inventory or property owned by other parties that are on the premises.
- 8* ☐ Included ☒ N/A Enclose proof of citizenship, birth certificates, or naturalization documents for all persons listed on this application, unless this is a corporation application.
- 9* ☒ Included ☐ N/A If a corporation, attach copy State of Nebraska Corporation Registration or articles of incorporation.

WHEN YOU HAVE COMPLETED THIS CHECKLIST, THE APPLICATION FORM(S) AND ATTACHED

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission
PO Box 95046,
301 Centennial Mall South
Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>
Phone: (402) 471-2571
Fax: (402) 471-2814

RECEIVED

DEC 22 2004

**NEBRASKA LIQUOR
CONTROL COMMISSION**

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in **Triplicate** 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond *send copy
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	*\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	*\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	*\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	*\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	*\$ 1,000 min.

TYPE OF APPLICATION *	NAME OF PERSON ASSISTING WITH APPLICATION	
Type of application being applied for (check appropriate box)		
1. <input type="radio"/> Individual License requires Form 1 to be attached.	Name _____	
2. <input type="radio"/> Partnership License requires Form 2 to be attached.	Firm Name _____	Address _____
3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached	Rembolt Ludtke	1201 Lincoln Mall, Suite 102, Linc

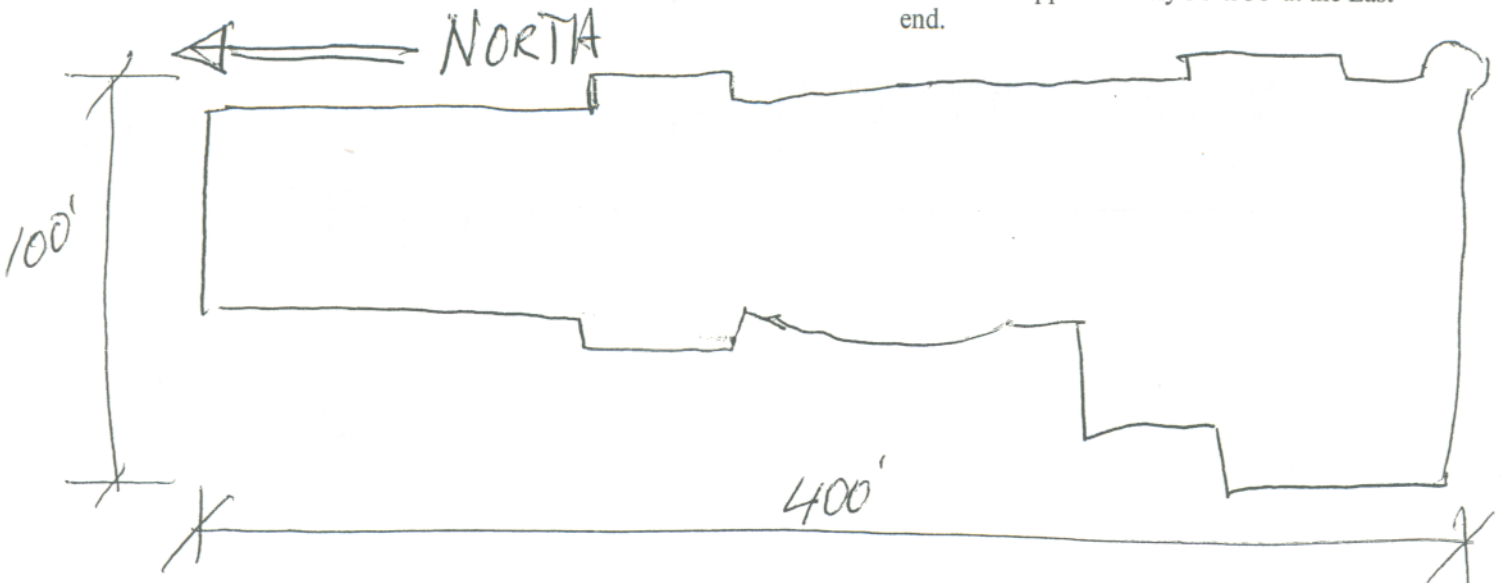
SECTION A -- LOCATION INFORMATION -- Must be completed by all applicants			
Trade Name (name of business)		Telephone Number at premise to be licensed	
Beacon Hills		402-476-5300	
1) Street Address of Proposed licensed premise		2) Mailing Address for receipt of Liquor Control Commission mailings	
5353 North 27th Street		5353 North 27th Street	
City	County	City	County
Lincoln	Lancaster	Lincoln	Lancaster
Zip Code	Is this located inside the city limits?	Zip Code	
68521	<input checked="" type="radio"/> Yes <input type="radio"/> No	68521	

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.

☒ ALL FLOORS OF AN
IRREGULAR SHAPED
3 STORY BUILDING
100' X 400' INCLUDING
LOWER LEVELS

Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.



SECTION B		OTHER INFORMATION REQUIRED *		Explanation/Comments Note: Only what is visible on screen will be printed
	Yes	No		
<p>* 1. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DUIs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	<p>See attached MVR's Minor traffic violations</p> <p>No charges pending for any member or their spouses</p>	
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached	
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached	
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	<p>Home Federal Savings Bank 1016 Civic Center Drive NW Suite 300 P.O. Box 6947 Rochester, MN 55903-6947</p>	
<p>* 5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		

RECEIVED

DEC 22 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>Pinnacle Bank - Folksway 2703 Folksway Blvd. Lincoln, NE 68521 Leo M. Sand Jamie Thelen Scott Bailey Joyce Winter</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>None</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Carole Regan 50 to 60 hours a week</p>		

RECEIVED

DEC 22 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

<p>13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.</p>	<p>Ms Regan has passed the State of Nebraska's Responsible Hospitality Program and just renewed her certificated for this program in the Summer of 2004. She has 10 plus Yr Experience in managing alcohol related establishments.</p>																												
<p>14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)</p>	<p>Property is owned by Lincoln NE Lodging, LLC - See attached</p>																												
<p>15. When do you intend to open for business?</p>	<p>Purchasing an existing business Closing date of 12/22/04</p>																												
<p>16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.</p>																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">NAME</th> <th style="width: 15%;">FROM (YEAR)</th> <th style="width: 15%;">TO (YEAR)</th> <th style="width: 35%;">RESIDENCE (CITY, STATE)</th> </tr> </thead> <tbody> <tr> <td>Leo Maynard Sand</td> <td>1987</td> <td>2004</td> <td>Albany, MN</td> </tr> <tr> <td>Daniel Joseph Tomsche</td> <td>1993</td> <td>2004</td> <td>Albany, MN</td> </tr> <tr> <td>David Scott Tomsche</td> <td>1993</td> <td>2004</td> <td>Melrose, MN</td> </tr> <tr> <td>Steven Edward Tomsche</td> <td>1993</td> <td>2004</td> <td>Plymouth, MN</td> </tr> <tr> <td>Michael John Tomsche</td> <td>1993</td> <td>2004</td> <td>Edina, MN</td> </tr> <tr> <td>Steven Duane Soltau</td> <td>1993</td> <td>2004</td> <td>Edina, MN</td> </tr> </tbody> </table>		NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)	Leo Maynard Sand	1987	2004	Albany, MN	Daniel Joseph Tomsche	1993	2004	Albany, MN	David Scott Tomsche	1993	2004	Melrose, MN	Steven Edward Tomsche	1993	2004	Plymouth, MN	Michael John Tomsche	1993	2004	Edina, MN	Steven Duane Soltau	1993	2004	Edina, MN
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)																										
Leo Maynard Sand	1987	2004	Albany, MN																										
Daniel Joseph Tomsche	1993	2004	Albany, MN																										
David Scott Tomsche	1993	2004	Melrose, MN																										
Steven Edward Tomsche	1993	2004	Plymouth, MN																										
Michael John Tomsche	1993	2004	Edina, MN																										
Steven Duane Soltau	1993	2004	Edina, MN																										

RECEIVED

DEC 22 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.

14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)

15. When do you intend to open for business?

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Karen Marie (Weber) Sand	1987	2004	Albany, MN
Margaret Anne (Kleiner) Tomsche	1993	2004	Melrose, MN
Brenda Marie (Barutt) Tomsche	1993	2004	Plymouth, MN
Amy Jo Poss (Poss) Tomsche	1993	2004	Edina, MN
Jane Groven (Loreg Groven) Solt	1993	2004	Edina, MN

RECEIVED

DEC 22 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY STATE)

RECEIVED
DEC 22 2004
NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25 % of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.


sign here Daniel J. Tomsch
sign here AC
sign here Sam L. Tomsch
sign here M.J. Gallegos

sign here Frederic W. Tomsch
sign here Margaret A. Tomsch
sign here [Signature]

Subscribed in my presence and sworn to before me this 18th day of December, 2004.

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

(SEAL)

 JAMES W. SAND
Notary Public
Stearns County, Minnesota
My Commission Expires Jan. 31, 2005
sign here [Signature]
Notary Public Signature

FORM 45-4010
Rev. 7/01

ATTACHMENT TO APPLICATION FOR LICENSE
SIGNATURE PAGE

[Signature]

Karen M. Sand

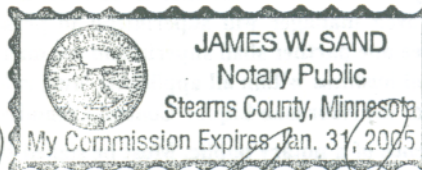
L. Jensen

Steve S. Seltan

Jane G. Seltan

Subscribed in my presence and sworn to before me this 18th day of December,
2004.

(SEAL)



[Signature]
Notary Public Signature

G:\WDOX\clients\100\000\00016291.WPD

RECEIVED

DEC 22 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

Corporation/LLC Application for License - Form 3
Nebraska Liquor Control Commission

RECEIVED

DEC 22 2004

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: **a)** each stockholder owning over 25% of the stock, **b)** chief executive officer, **c)** proposed manager and **d)** all spouses
- 3) Information regarding spouses must be completed

Required areas marked by a red asterisk (*)

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

Lincoln NE Lodging, LLC *

Total Number of Shares (if corporation)

100 *

Corporate Street Address

366 South 10th Avenue, PO Box 727 *

Mailing address for receipt of Liquor Control Commission Mailings

366 South 10th Avenue, PO Box 727 *

Corporate Telephone Number

320-202-3100 *

City

Waite Park *

County

Stearns *

State

MN *

Zip Code

56387 * - 0727

Name of Registered Agent

Leo M. Sand *

Name of Proposed Manager

Carole Regan *

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name

Leo M. Sand *

Title

Chief Executive Officer *

Date of Birth

*

Social Security Number

*

Home Address (1)

318 Golf View Drive *

City

Albany *

State

MN *

Zip Code

56307 * -

Home Telephone Number

320-845-7085 *

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES

Name of Officers, Directors, Members and Spouses.
Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Sand, Leo, Maynard

Chief Manager

Spouse Name

Sand, Karen, Marie (Weber)

N/A

Partner Number of Shares / % 0

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses.

RECEIVED

DEC 22 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Sand Lodging, Inc. (Leo M. Sand)

N/A

N/A

Spouse Name

N/A

Partner Number of Shares / % 89.164

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Tomsche, Daniel, Joseph

Member

Spouse Name

N/A

N/A

N/A

N/A

Partner Number of Shares / % 1.788

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Soltau, Steven, Duane

Member

Spouse Name

Soltau, Jane, Groven (Loreg Groven)

N/A

Partner Number of Shares / % 1.896

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Spouse Name

Partner Number of Shares / %

Spouse Number of Shares / %

(If Necessary, Continue on Separate Sheet)

Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Gallagher, Michael, John

Spouse Name

Gallagher, Sarah, Jane (Gelhar)

Member

N/A

Partner Number of Shares / % 1.788

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses.
Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Tomsche, Michael, John

Spouse Name

Tomsche, Amy Jo, Poss (Poss)

Member

N/A

Partner Number of Shares / % 1.788

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses.
Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Tomsche, Steven, Edward

Spouse Name

Tomsche, Brenda, Marie (Barutt)

Member

N/A

Partner Number of Shares / % 1.788

Spouse Number of Shares / % 0

Name of Officers, Directors, Members and Spouses.
Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Tomsche, David, Scott

Spouse Name

Tomsche, Margaret, Anne (Kleiner)

Member

N/A

Partner Number of Shares / % 1.788

Spouse Number of Shares / % 0

(If Necessary, Continue on Separate Sheet)

RECEIVED

DEC 22 2004

Is this Corporation/LLC controlled by another Corporation?

Yes ☒ No ☐

Name of control Corporation

Sand Lodging, Inc.

NEBRASKA LIQUOR
CONTROL COMMISSION

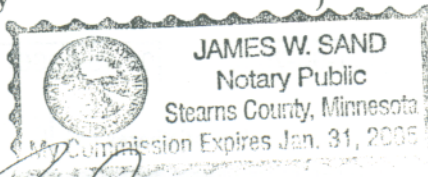
If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC.
Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: January 1 Ending date: December 31

State of Minnesota

STEARNS County



Notary Public Signature & Seal

By

President/Member

LEO M. SAND

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Secretary/Member

Daniel J Tomsch

Verify Form and Print

FORM 35-4183
REV. 02/01

SAND LODGING, INC.
Waite Park, Minnesota

RECEIVED

DEC 22 2004

C E R T I F I C A T E

NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned, Joyce A. Winter, being first duly sworn on oath, states that she is the Secretary of Sand Lodging, Inc. (the "Corporation") and that pursuant to a certain Written Consent of All Directors to Actions Taken Without Meeting, Notice or Vote, dated December 20, 2004, the following resolution was unanimously adopted:

"BE IT RESOLVED, that Sand Lodging, Inc. changed its name from Baxter Country Estates, Inc. which was filed with the Secretary of the State of Minnesota on June 12, 2001. Said filing is attached and made part hereof along with the current and enforce Articles of Incorporation of the Corporation and the Board hereby certifies that Leo M. Sand is the 100% shareholder of the Corporation."

"BE IT FURTHER RESOLVED, that Sand Lodging, Inc. is an 89.164% owner in Lincoln NE Lodging, LLC, a Minnesota limited liability company."

"BE IT FURTHER RESOLVED, that Leo M. Sand, Chief Executive Officer of Sand Lodging, Inc. is hereby authorized to cause the Corporation to enter into all agreements with the Nebraska Liquor Control Commission necessary to consummate the temporary and permanent liquor licenses in the name of Lincoln NE Lodging, LLC."

Sand Lodging, Inc. unanimously consents to and adopts the above resolution and the foregoing is a correct copy of said Resolution as it appears in the permanent records of Sand Lodging, Inc.

DATED this 20th day of December, 2004.



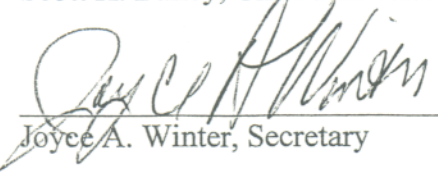
Leo M. Sand, Chief Executive Officer



Jamie J. Thelen, President



Scott K. Bailey, Chief Financial Officer



Joyce A. Winter, Secretary

RECEIVED

DEC 22 2004

Application for Corporate Manager***Must Be A Nebraska Resident*****Please submit in Triplicate****NEBRASKA LIQUOR
CONTROL COMMISSION**Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571

Fax: (402) 471-2814

Web address: <http://www.nol.org/home/NLCC/>

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Lincoln NE Lodging, LLC *

Class & License number

NA *

Trade Name of Licensed Premise

Beacon Hills *

Street Address of Licensed Premise

5353 North 27th Street *

City

Lincoln *

County

Lancaster *

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:  c/m**APPLICANT INFORMATION (MUST BE 21 OR OVER)**

Full Name (Last, First, Middle, Maiden)

Regan, Carole, Louise *

Sex *

F M

C C

Social Security Number

Date of Birth

Place of Birth

Omaha, NE *

Home Street Address

1241 North 54th Street *

City

Lincoln *

County

Lancaster *

State

NE *

Zip Code

68504 *

Home Telephone Number

402/483-0452 *

Business Telephone Number

402/476-5300 *

Drivers License Number

State

NE *

RECEIVEDAre You Married? * Yes ☐ No ☒ If Yes, You must complete the following:**SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)**

DEC 22 2004

Full Name (Last, First, Middle, Maiden)

Social Security Number

NEBRASKA LIQUOR
CONTROL COMMISSION

Drivers License Number

State

Date of Birth

Place of Birth

* 1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No

☐☒

* 2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No

☐☒

* 3. Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No

☐☒

* 4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?

Nebraska Liquor Control Act (§53-131.01)

Yes No

☒☐* 5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No

☒☐

RESIDENCES FOR PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE**RECEIVED**

DEC 22 2004

NEBRASKA LIQUOR
CONTROL COMMISSIONYear
From To

Applicant: City & State

Omaha, NE

1993 1999

Spouse: City & State

Year
From To

Applicant: City & State

Lincoln, NE

1999 prese

Spouse: City & State

Year
From To

Applicant: City & State

Spouse: City & State

Year
From To

Applicant: City & State

Spouse: City & State

EMPLOYERS - LIST LAST TWO EMPLOYERSYear
From To

Name of Employer

Garden Cafe

1999 2000

Name of Supervisor

Anne McVeigh

Telephone Number

402/434-3750

Year
From To

Name of Employer

Beacon Hills

2000 present

Name of Supervisor

Telephone Number

Anne McVeigh

402/476-5300

**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY
APPLICANT & SPOUSE**

STATE OF NEBRASKA)

) SS


COUNTY OF LANCASTER

RECEIVED

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law (Sec. 853-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.


Signature of Applicant

Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this
20th day of December, 2004

Subscribed in my presence and sworn to before me this
____ day of _____.




Notary Signature & Seal

Notary Signature & Seal

Verify and Print

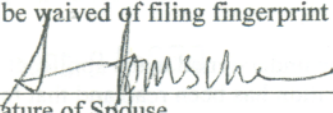
FORM 35-4013
REV. 2/01

RECEIVED

NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

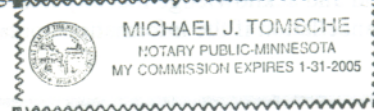
DEC 22 2004

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.


Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 18th day of December, A.D., 2004


Signature of Notary Public



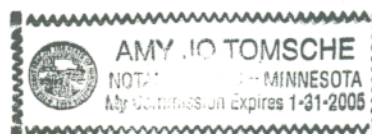
The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.


Signature of Licensee/Applicant

MICHAEL TOMSCHE
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 1st day of December, A.D., 2004.


Signature of Notary Public



FORM 35-4178
REV 2/01

RECEIVED

DEC 22 2004

NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Margaret A. Tomsche
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 18th day of December, A.D., 2004.



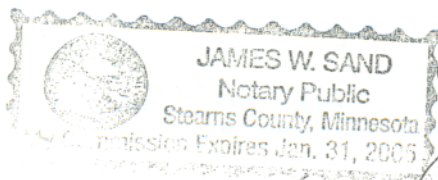
James W. Sand
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

David Scott Tomsche
Signature of Licensee/Applicant

DAVID SCOTT TOMSCHE
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 18th day of December, A.D., 2004.



James W. Sand
Signature of Notary Public

RECEIVED

DEC 22 2004

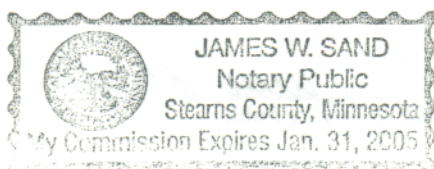
NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Kam Sand
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 18th day of December, A.D., 2004.



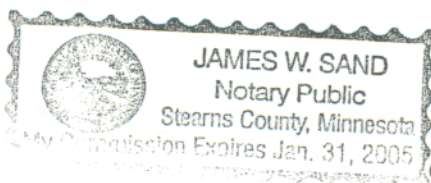
James W. Sand
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]
Signature of Licensee/Applicant

Leo Maynard Sand
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 18th day of December, A.D., 2004.



James W. Sand
Signature of Notary Public

**NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION**

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

n/A Single Divorced
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this _____ day of _____, A.D., _____.

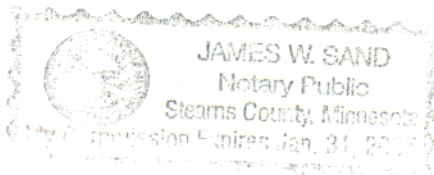
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

[Signature]
Signature of Licensee/Applicant

Daniel J Tomsch
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 18th day of December, A.D., 2004.



[Signature]
Signature of Notary Public

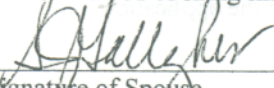
RECEIVED

DEC 22 2004

NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

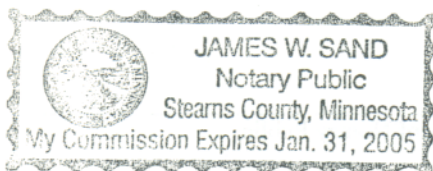
NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.



Signature of Spouse

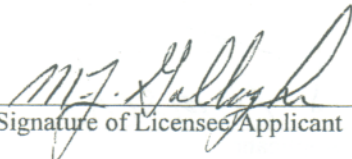
SUBSCRIBED in my presence and sworn to before me this 19 day of Dec, A.D., 2004.





Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

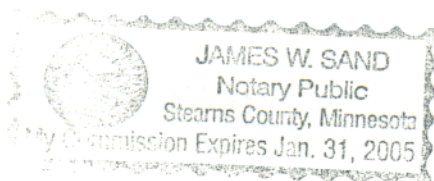


Signature of Licensee/Applicant

MICHAEL J GALLAGHER

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 19 day of DEC, A.D., 2004.





Signature of Notary Public

FORM 35-4178
REV 2/01

RECEIVED

DEC 22 2004

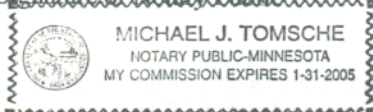
NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Jane M. Soltau
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 19th day of December, A.D., 2004

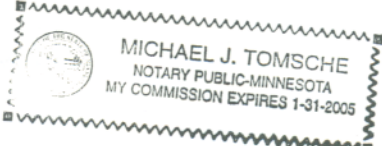
MJ Tomsche
Signature of Notary Public

MICHAEL J. TOMSCHE
NOTARY PUBLIC-MINNESOTA
MY COMMISSION EXPIRES 1-31-2005

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Steven D. Soltau
Signature of Licensee/Applicant

Steven D. Soltau
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 19th day of December, A.D., 2004

MJ Tomsche
Signature of Notary Public

MICHAEL J. TOMSCHE
NOTARY PUBLIC-MINNESOTA
MY COMMISSION EXPIRES 1-31-2005

FORM 35-4178
REV 2/01

RECEIVED

NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

DEC 22 2004

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Michael M. Tomsche
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 20th day of December, A.D., 2004.

STEVEN E. TOMSCHE
Signature of Notary Public
STEVEN E. TOMSCHE
NOTARY PUBLIC-MINNESOTA
MY COMMISSION EXPIRES 1-31-2005

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

STEVEN E. TOMSCHE
Signature of Licensee/Applicant

Steven E. Tomsche
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 20th day of December, A.D., 2004.

MJ TOMSCHE
Signature of Notary Public

MICHAEL J. TOMSCHE
NOTARY PUBLIC-MINNESOTA
MY COMMISSION EXPIRES 1-31-2005

FORM 35-4178
REV 2/01